

PD7DDDDDD2595

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

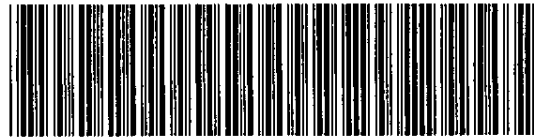
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 MAR 22 PM 4:43

Att DIS
10 3/25/12

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of business

DOCUMENT NUMBER: P07000002595

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Maribel Leon

(Name of Contact Person)

(Firm/Company)

17720 NW 14 Avenue

(Address)

Miami, FL 33169

(City/State and Zip Code)

For further information concerning this matter, please call:

Maribel Leon

(Name of Contact Person)

at (786) 413-8980

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

MAILING ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 13, 2012

MARIBEL LEON
17720 NW 14 AVENUE
MIAMI, FL 33169

SUBJECT: DIVINE MEDICAL SOLUTIONS, ICN.
Ref. Number: P07000002595

We have received your document for DIVINE MEDICAL SOLUTIONS, ICN. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

YOU FAILED TO SIGN THE DOCUMENT.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 412A00009203

RECEIVED
12 MAR 22 AM 10:02
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:

Divine Medical Solutions, INC

SECOND: The document number of the corporation (if known): P07000002595

THIRD: The file date of the articles of incorporation: 01/05/2007

FOURTH: (CHECK AT LEAST ONE BOX)

☒ None of the corporation's shares have been issued.

☐ The corporation has not commenced business.

FIFTH: No debt of the corporation remains unpaid.

SIXTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.

SEVENTH: Adoption of Dissolution (CHECK ONE)

☐ A majority of the incorporators authorized the dissolution.

☒ A majority of the directors authorized the dissolution.

Signature: Maribel Leon

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

Maribel Leon

(Typed or printed name of person signing)

President

(Title of Person Signing)

Filing Fee: \$35

FILED
12 MAR 22 PM 4:43
SECRETARY OF STATE
DIVISION OF CORPORATIONS